DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
Rockville, MD 20857

NDA 20-966/S-022

Johnson & Johnson Pharmaceutical Research and Development
Attention: Melissa L. Gannon
Associate Director, Global Regulatory Affairs
920 Route 202 South
P.O. Box 300
Raritan, New Jersey 08869-0602

Dear Ms. Gannon:

Please refer to your supplemental new drug application dated April 3, 2009, received April 6, 2009, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for SPORANOX® (itraconazole) Injection, 10 mg/mL.

This submission contains revisions to the product labeling in part in response to the Supplemental Request Letter issued by the Division on March 6, 2009, and provides for the following changes to the package insert (additions are noted with underline and deletions noted with ~~strikethrough~~):

1. In the **CLINICAL PHARMACOLOGY/Special Populations/Renal Insufficiency** subsection, the last paragraph is revised as follows:

   In patients with mild (defined as creatinine clearance 50-80 mL/min) ~~to~~ and moderate (defined as creatinine clearance 30-49 mL/min) renal impairment, SPORANOX® Injection should be used with caution. Serum creatinine levels should be closely monitored and, if renal toxicity is suspected, consideration should be given to ~~changing to SPORANOX® Capsules, if clinically indicated and consistent with approved indications~~ modifying the antifungal regimen to an alternate medication with similar antimycotic coverage. SPORANOX® Injection is contraindicated in patients with severe renal impairment (creatinine clearance <30 mL/min). (See CONTRAINDICATIONS, PRECAUTIONS, and DOSAGE AND ADMINISTRATION.)

2. In the **PRECAUTIONS** section, the **Renal Impairment** subsection appears twice, so the first of these is deleted as follows:

   ~~**Renal Impairment:**~~
   ~~As severe renal impairment prolongs the elimination rate of hydroxyl-β-cyclodextrin, SPORANOX® (itraconazole) Injection should not be used in patients with severe renal dysfunction (creatinine clearance <30 mL/min). (See CLINICAL PHARMACOLOGY: Special Populations.)~~

3. In the **ADVERSE REACTIONS** section, the first paragraph is revised as follows:

   SPORANOX® has been associated with rare cases of serious hepatotoxicity, including liver failure and death. Some of these cases had neither pre-existing liver disease nor a serious underlying medical condition. If clinical signs or symptoms develop that are consistent with liver disease, treatment should be discontinued and liver function testing performed. The risks and benefits of SPORANOX® use should be reassessed. (See WARNINGS: Hepatic Effects and PRECAUTIONS: ~~General~~ Hepatotoxicity and Information for Patients.)

4. The **DOSAGE AND ADMINISTRATION/Use in Patients with Renal Impairment section** is revised as follows:

   In patients with mild (defined as creatinine clearance 50-80 mL/min) ~~to~~ and moderate (defined as creatinine clearance 30-49 mL/min) renal impairment, SPORANOX® ~~IV~~ Injection should be used with caution. Serum creatinine levels should be closely monitored and, if renal toxicity is suspected, consideration should be given to ~~changing to SPORANOX® capsules~~ modifying the antifungal regimen to an alternate medication with similar antimycotic coverage. (See PHARMACOLOGY: Special Populations, WARNINGS, and PRECAUTIONS)

We have completed our review of this application. This application is approved, effective on the date of this letter, for use as recommended in the package insert submitted on April 3, 2009.

As soon as possible, but no later than 14 days from the date of this letter, please submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format as described at http://www.fda.gov/oc/datacouncil/spl.html that is identical to the enclosed labeling text for the package insert and patient package insert. Upon receipt, we will transmit that version to the National Library of Medicine for public dissemination. For administrative purposes, please designate this submission, "**SPL for approved supplements NDA 20-966/ S-022.**

Marketing the product with FPL that is not identical to the approved labeling text and in the required format may render the product misbranded and an unapproved new drug.

LETTERS TO HEALTH CARE PROFESSIONALS

If you issue a letter communicating important information about this drug product (i.e., a "Dear Health Care Professional" letter), we request that you submit a copy of the letter to this NDA and a copy to the following address:

MEDWATCH
Food and Drug Administration
Suite 12B05
5600 Fishers Lane
Rockville, MD 20857

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

If you have any questions, call June Germain, Regulatory Health Project Manager, at (301) 796-4024.

Sincerely,

{See appended electronic signature page}

Renata Albrecht, MD
Director
Division of Special Pathogen and Transplant Products
Office of Antimicrobial Products
Center for Drug Research and Evaluation

Enclosure: package insert

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

Renata Albrecht

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